

South Carolina Department of Health and Environmental Control
Compliance Agreement
AREA 2: CHILD FIND/PUBLIC AWARENESS COMPLIANCE WORK PLAN

AREA OF NON-COMPLIANCE: DHEC does not ensure that there is a coordinated child find system and that public awareness materials are made available to the public.

BASELINE DATA:

1. CIMP Self-Assessment Report – December 2000:

- a. Rates of referrals were increasing over time for Caucasian infants and toddlers with disabilities and decreasing for minority infants and toddlers with disabilities; and
- b. Providers reported a lack of training to inform referring and collaborating agencies about early intervention services.

2. OSEP Monitoring Report – Onsite Visit February 2002:

- a. Public awareness activities were not effective in informing parents of infants and toddlers with disabilities of underrepresented populations;
- b. There was a lack of coordination for child find and public awareness between agencies (including child care, migrant Head Start, SSI);
- c. Physician referrals were problematic including a “wait and see” attitude and a misperception that BabyNet involves health instead of development;
- d. There was a lack of public awareness materials in daycare centers, pediatric offices or developmental centers; and
- e. Public awareness materials were not distributed or available in Spanish.

3. BabyTrac Data Reports – June 2003:

- a. BabyTrac data indicates expected number of infants and toddlers are not being identified.

OUTCOME: DHEC will ensure the development and implementation of a comprehensive, coordinated public awareness/child find system that results in the identification, evaluation, and assessment of all eligible infants and toddlers.

Goal 1: DHEC shall ensure that the child find system is coordinated with all major efforts to locate and identify eligible children conducted by other State agencies.

Goal 2: DHEC will ensure that the child find system is coordinated with all other major efforts to locate and identify children conducted by other State agencies, programs, and organizations, and DHEC shall conduct outreach to these entities including private entities such as pediatric practices and day care centers.

Goal 3: Families will have access to public awareness materials (to ensure identification of all eligible infants and toddlers and to enable access to culturally competent services) that inform and promote referral of eligible infants and toddlers to the Part C system.

With prior written approval from OSEP, adjustments to the Activities to Reach Results column listed in this table may be made when necessary to support achievement of compliance outcomes within the required timelines. The Activities to Reach Results will be evaluated every six months to determine their effectiveness and any need for change. Any requests for changes or amendments will be submitted to OSEP in writing.

| Objectives/Activities to Reach Results | Verification | Target Completion Date | Date Completed |
|---|--|--|----------------|
| Objective CF-1: Develop and implement a set of coordinated statewide strategies for public awareness/child find (with emphasis on underrepresentation in BabyNet) with agencies/programs within and outside of DHEC. | | | |
| CF-1A. Review statewide information and establish baseline data for underrepresented populations. (Findings: 2a) | Report baseline data to OSEP regarding: <ul style="list-style-type: none"> • Number of infants and toddlers referred by underrepresented populations; • Number of infants and toddlers eligible by underrepresented populations (including rural, Catawba Nation, and other populations) and income (voluntary); • Number of infants and toddlers referred by private physicians, state agencies, hospitals, clinics, and other referral sources. | September 30, 2003 and quarterly thereafter. | |
| CF-1B Develop a list of DHEC programs that have a history of successful outreach to underrepresented populations and may potentially assist in public awareness/child find efforts (including Medical Home Project). (Findings: 2a, 2b) | The list of identified programs will be available for review. | September 30, 2003 | |
| CF-1B.1 Convene a workgroup within DHEC to address child find/public awareness, especially related to underrepresented populations | Agenda, meeting minutes, and attendance available for review. | January 31, 2004 | |

*The finding numbers referenced here correspond to the summary of OSEP's findings on page 1 of this chart.
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| including individuals of lower socio- economic status. | | | |
| CF-1C. Convene a taskforce of the South Carolina Interagency Coordinating Council (SC-ICC) to address statewide child find/public awareness issues, especially related to underrepresented populations. (Findings: 2a, 2b) | Agenda, meeting minutes, and attendance from first meeting available for review. | February 29, 2004 | |
| CF-1C.1 Develop statewide plan with strategies and timelines to address child find/public awareness issues, especially related to underrepresented populations. | Plan of strategies with timelines will be submitted to OSEP. | April 30, 2004 | |
| CF-1C.2 Implement child find/public awareness improvement strategies according to timelines established by workgroup. | As documented in quarterly reports to OSEP. | December 31, 2004 | |
| Objective CF-2: Reach out to private entities, particularly physicians, to facilitate their timely referral of potentially eligible infants and toddlers and increase their knowledge of BabyNet. | | | |
| CF-2A. Develop a target list of private agencies/ organizations (e.g. pediatricians, OB/GYN, therapy groups, midwife association, etc.) that could potentially be child find resources with particular emphasis on rural areas. (Findings: 2a, 2b, 2c,) | List available for review and disseminate via website. | October 31, 2003 | |
| CF-2A.1 Seek SC-ICC input on which potential groups to target first for child find outreach. Physician organizations must be a priority. | Revised list is available for review | November 30, 2003 | |
| CF-2A.2 Have individual/group meetings, at least one per | Lists of individual/group meetings held and joint child find strategies developed shall be available | November 30, 2003 and quarterly | |

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| month, with targeted groups to facilitate collaboration to develop joint strategies for child find and increasing public awareness. | for review. | thereafter. | |
| CF-2A.3 Implement strategies developed in CF-2A.2 as scheduled. | Progress toward the joint strategies mentioned in CF-2A.2 (e.g., numbers of public awareness materials disseminated by date/location, dates and agendas of meetings, number of individuals attending) will be documented in quarterly reports to OSEP. | November 30, 2003 and quarterly thereafter. | |
| Objective CF-3: Develop and implement coordination activities related to infants and toddlers with disabilities with the Catawba Nation. | | | |
| CF-3A. Conduct a series of planning meetings between BabyNet and members of the Catawba Nation. (Findings: 2a, 2b) | Agenda and minutes from the meeting are available for review. | First meeting by January 31, 2004 | |
| CF-3B. Develop a written agreement between the Catawba nation and DHEC to address child find and the provision of Part C services to Catawba Nation infants and toddlers. (Findings: 2a, 2b) | Submit to OSEP draft written agreement. Submit signed written agreement | May 31, 2004 July 31, 2004 | |
| CF-3C. Train BabyNet staff in cultural competence and agreement specifics. (Findings: 2a, 2b) | Agenda and list of participants from training is available for review. | July 2004 | |
| CF-3D. Implement the activities in the agreement. (Findings: 2a, 2b) | As documented in quarterly reports to OSEP. | September 30, 2004 | |
| Objective CF-4: Implement statewide public awareness activities targeted to the general population and referral sources. | | | |
| CF-4A. Revise BabyNet System display boards and create an additional board in Spanish. (Findings: 2a, 2e) | Display board in English and Spanish are available for use by BNCTs in local child find efforts. Use of the display boards for public awareness/child find activities will be reported. | November 30, 2003 | |
| CF-4B. Revise BabyNet System brochure with Spanish translation. (Findings: 2e) | Brochure in English and Spanish is available for review and disseminated. Number of brochures, where and to whom will be documented and | December 31, 2003 | |

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| CF-4C. Create distribution process for use by BNCTs (including order and dissemination/tracking forms) for public awareness materials. (Findings: 2b, 2d) | reported. Distribution/tracking process and forms are available for review and dissemination through BNCT is documented. How a family found out about BabyNet will be recorded through BabyTrac-II and analyzed to determine effectiveness of various strategies. | June 30, 2004 | |
| CF-4D. Update (with input from families) and disseminate BabyNet video including a Spanish version. (Findings: 2b, 2d) | Video is available for review; list of doctor's offices, clinics, DHEC waiting rooms, and Health district waiting rooms, etc. in which video was distributed available for review. | September 30, 2004 | |
| Objective CF-5: Ensure the development and implementation of individual BabyNet Coordination Team Child Find Plans as a component of the overall BNCT Compliance Plan process. | | | |
| CF-5A. Prepare data tables for the state and for each BNCT by county (by underrepresented group, including infants and toddlers with disabilities in rural areas) on numbers of infants and toddlers referred and determined eligible and sources of referrals. Districts will be ranked according to these variables. (Findings: 2a, 2b) | Data reports will be available for review and disseminated to SC-ICC and BNCTs. Report data quarterly to OSEP to monitor progress. | September 30, 2003 and quarterly thereafter. | |
| CF-5B. Consult with National Early Childhood Technical Assistance Center (NECTAC) for assistance in designing the process and tools BNCTs will use to develop and implement their local child find plans to target underrepresented populations including rural areas, timely referral, appropriate referral sources, and effective strategies. These plans will include root cause analysis with particular attention to problems SC is having now and identification of state causes, local causes, personnel issues | Procedures for the written plans and tools for local child find plans will be available for review. | October 31, 2003 | |

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| and/or implementation issues. (Findings: 2a, 2c) | | | |
| CF-5B.1 Incorporate child find improvement planning into overall BabyNet Coordination Team Compliance Plans under General Supervision Objectives GS-5. (Findings: 2a, 2b, 2c, 2d, 2e) | BNCT Compliance Plans submitted in accordance with GS-5 will include improvement strategies to explain or address discrepancies in data. Compliance Plan progress will be reported to OSEP in quarterly reports. | Timelines as indicated in GS-5 target dates of completion. | |